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AF/3623

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GROUP 3600

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/883,590
		Filing Date	June 18, 2001
		First Named Inventor	Renee Frengut
		Group Art Unit	3623
		Examiner Name	Andre Boyce
Total Number of Pages in This Submission		Attorney Docket Number	05049-1-0010

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Check in the sum of \$475.00, No. 7138
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Check in the sum of \$165.00, No. 7119 Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		USPTO Cust. No.
		26135 PATENT TRADEMARK

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Lott & Friedland, P.A. By: Ury Fischer USPTO Reg. No. 46,167
Signature	
Date	December 2, 2003

CERTIFICATE OF TRANSMISSION/EXPRESS MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Comm. for Patents, P.O. Box 1450 Alexandria, VA 22313.

Typed or printed name	Ury Fischer	Express Mail Label No.	EL 962690092 US
Signature		Date	December 2, 2003

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FEE TRANSMITTAL
for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 640.00)**Complete if Known**

Application Number	09/883,590
Filing Date	06/18/2001
First Named Inventor	Renee Frengut
Examiner Name	Andre Boyce
Art Unit	3623
Attorney Docket No.	05049-1-0010

METHOD OF PAYMENT1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	502725
Deposit Account Name	LOTT & FRIEDLAND, P.A.

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status.
See 37 CFR 1.27

2. **Payment Enclosed:**

Check Credit card Money Order Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001	750	2001 375 Utility filing fee	
1002	330	2002 165 Design filing fee	
1003	520	2003 260 Plant filing fee	
1004	750	2004 375 Reissue filing fee	
1005	160	2005 80 Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)**2. EXTRA CLAIM FEES**

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		-20** =	0	x _____ = \$0.00
		- 3** =	0	x _____ = \$0.00
Multiple Dependent				

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	84	2201 42 Independent claims in excess of 3
1203	280	2203 140 Multiple dependent claim, if not paid
1204	84	2204 42 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051 65 Surcharge - late filing fee or oath	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	410	2252 205 Extension for reply within second month	475.00
1253	930	2253 465 Extension for reply within third month	
1254	1,450	2254 725 Extension for reply within fourth month	
1255	1,970	2255 985 Extension for reply within fifth month	
1401	320	2401 160 Notice of Appeal	165.00
1402	320	2402 160 Filing a brief in support of an appeal	
1403	280	2403 140 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive - unavoidable	
1453	1,300	2453 650 Petition to revive - unintentional	
1501	1,300	2501 650 Utility issue fee (or reissue)	
1502	470	2502 235 Design issue fee	
1503	630	2503 315 Plant issue fee	
1460	130	2460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
1809	750	2809 375 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810 375 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801 375 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 640.00)**SUBMITTED BY**

Name (Print/Type)	Ury Fischer	Registration No. (Attorney/Agent)	46,167	Telephone	(305) 448-7089
Signature					Date

Complete (if applicable)

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